

Docket No.:	
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As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: BACK LIGHT DEVICE AND LIQUID CRYSTAL DISPLAY APPARATUS

described an	d claimed in the specification:			
Check one			•	
*a.	attached hereto.			
b.	☐ filed on as Application No	and amended on	(if applicable).	

the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No. 9-230584 filed on August 27,1997

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

> James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Registration No. 32,771 and Mario A. Costantino, Registration No. 33,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 Typewritten Full Name of First or Sole Inventor 2 **Inventor's Signature:		** * *	i		KASHIMA
		ntor's Signature: Given Name		Middle Initial	Family Name Kaslima
3	**Date of Signat	ture:	July	28	1998
	Residence: Shinjuku-ku		Month	Day Tokyo	Year Japan
	; Citizenship:	Japan	City	State or Province	Country
		Post Office Addres (Insert complete	s: c/o Dai Nippon	Printing Co., Ltd.	
		mailing address, including country			ku-ku, Tokyo 162-0062,
	*If Box (a.) is	checked, this form	may be executed only wi	hen attached to the specification	(including claims). Japan

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE 🔲